



# HIV/AIDS, STD & TB Prevention COLORADO

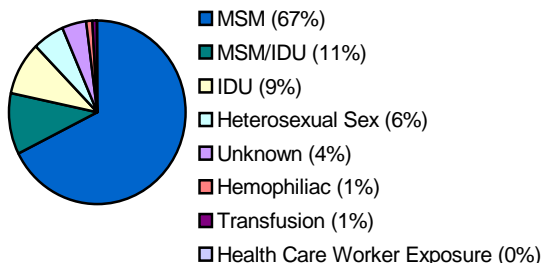
## HIV/AIDS Epidemic

Colorado reported 8,073 cumulative AIDS cases to CDC as of December 2003.

### Cumulative Reported AIDS Cases by Mode of Exposure, through Sept. 2004

\*N = 8,270

SOURCE: Colorado Department of Public Health and Environment

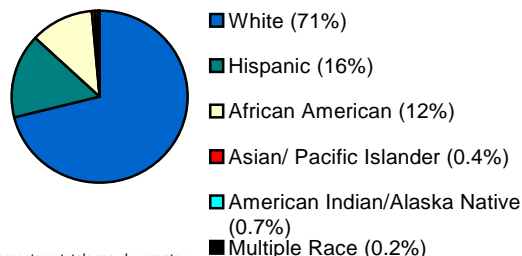


\*Percentage totals may be greater or less than 100 due to rounding or missing data.

### Cumulative Reported AIDS Cases by Race/Ethnicity, through Sept. 2004

\*N = 8,270

SOURCE: Colorado Department of Public Health and Environment



\*Percentage totals may be greater or less than 100 due to rounding or missing data.

## Sexually Transmitted Diseases (STDs)

### Syphilis

Primary and secondary (P&S) syphilis (the stages when syphilis is most infectious) remains a problem in the southern U.S. and some urban areas. In Colorado the rate of P&S syphilis decreased 46% from 1995-2004

- Colorado ranked 27<sup>th</sup> among the 50 states with 1.4 cases of P&S syphilis per 100,000 persons.
- The number of congenital syphilis cases increased from one in 1995 to two in 2004.

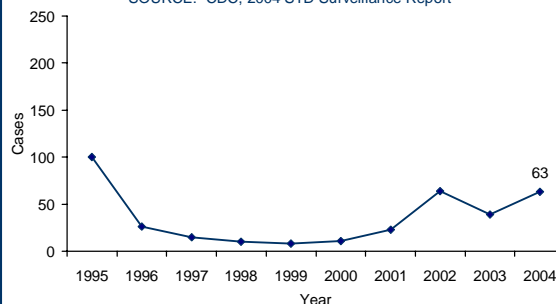
### Chlamydia and Gonorrhea

Chlamydial and gonorrheal infections in women are usually asymptomatic and often go undiagnosed. Untreated, these infections can lead to pelvic inflammatory disease (PID), which can cause tubal infertility, ectopic pregnancy, and chronic pelvic pain.

- Colorado ranked 21<sup>st</sup> among the 50 states in chlamydial infections (311 per 100,000 persons) and 33<sup>rd</sup> in the rate of gonorrhea infections (67.1 per 100,000 persons).
- Rates of chlamydia among Colorado women (455.9 cases per 100,000 females) were 2.7 times greater than those among Colorado men (168 cases per 100,000 males).

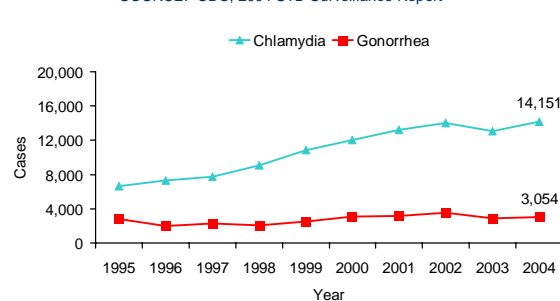
### P&S Syphilis Cases in Colorado, 1995-2004

SOURCE: CDC, 2004 STD Surveillance Report



### Chlamydia and Gonorrhea Cases in Colorado, 1995-2004

SOURCE: CDC, 2004 STD Surveillance Report

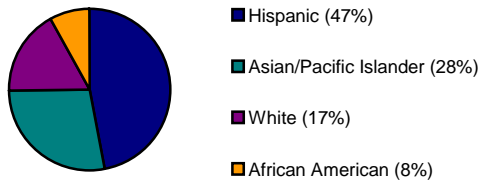


## Tuberculosis

### TB Cases by Race/Ethnicity, through 2003

\*N = 111

SOURCE: CDC, 2003 TB Surveillance Report



Although rates of tuberculosis (TB) infection in the U.S. have declined substantially since 1992, rates among foreign-born persons continued to increase. In 2003, Colorado reported

- ❑ The 34<sup>th</sup> highest rate of TB in the U.S.
- ❑ A total of 111 TB cases with 47% affecting Hispanics and 27% affecting Asian/Pacific Islanders. In all, about 69% were among foreign-born persons.

## Program Initiatives Supported by CDC

### HIV/AIDS

The Empowerment Program is a community-based organization funded through the Colorado Health Department that provides education, employment assistance, housing referrals and support services to women who are in disadvantaged positions due to incarceration, poverty, homelessness, or HIV/AIDS. The program's goal is to decrease rates of recidivism by providing case management, support services, basic skills education, housing and resource coordination that can offer viable alternatives to habits and choices that may lead to criminal behaviors.

### National Center for HIV, STDs & TB Prevention Funding to Colorado, 2005 (US\$)

HIV/AIDS	\$7,923,344
STDs	\$3,209,383
TB	\$399,025

### Sexually Transmitted Diseases (STDs)

The STD Program, in conjunction with the Infertility Prevention Program (IPP), is looking at new methods to increase chlamydia screening at Family Planning clinics for women within established screening criteria. One method to be piloted is providing chlamydia screening to females who come into the Family Planning clinic seeking a pregnancy test only. Because this procedure does not include a pelvic examination, chlamydia screening currently is not offered. With the new urine-based screening test, this option now becomes available. By providing this test to women seeking a pregnancy test only, the STD and IPP programs hope to increase the number of women screened for chlamydia.

### Tuberculosis (TB)

The Colorado State TB Control Program, with assistance from the Denver TB Control Program, conducted a recent survey of all laboratories in the state. The purpose of the survey was to identify those laboratories that perform TB diagnostic services, evaluate these services, and identify strengths and weaknesses in order to develop specific future interventions for improvement. The survey found that 38 of the laboratories (58%) do not provide any TB diagnostic services. Of the 27 laboratories that provide do provide such services, 21 (78%) used the most rapid methods available to identify acid-fast bacilli. Of the 22 laboratories that perform identification by culture, 11 (50%) used the most rapid methods available. Twelve laboratories (55%) had specific criteria in place for suspecting false-positive test results. Few of the laboratories surveyed currently track their turn-around times. The Colorado State TB Control Program is currently in discussion with its partners as to the best means to improve these services in the state.

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